CALIFORNIA FORM 7 FAIR POLITICAL PRACTICES COMMISSION A PUBLIC DOCUMENT

STATEMENT OF ECONOMIC INTERESTS

COVER PAGE

ERESTS Official Use OF FAIR POLITICAL PRACTICES COMMISSION

Date Received

Official Use Only

Please type or print in ink.

11 APR -8 PM 3:15

NAME OF FILER	(LAST)	(FIRST)	(MIDDLE)	
HACK		BERT		
1. Office, Agency,	or Court			
Agency Name				
CITY OF LAGU				
Division, Board, Depa	artment, District, if applicable	Your Position		
COUNTY OF O	RANGE	COUNCIL MEMBER		
► If filing for multiple	positions, list below or on an attachment.			
Agency:	ŧ	Position:		
2. Jurisdiction of	Office (Check at least one box)			
State		☐ Judge (Statewide Jurisdiction	n)	
•		County of ORANGE		
City of LAGUN	IA WOODS	Other		
3. Type of Statem	nent (Check at least one box)			
Annual: The per 2010o	riod covered is January 1, 2010, through Decemb	ber 31, Leaving Office: Date Left (Check one)		
The period co 2010.	overed is, through Decemb	er 31, O The period covered is a leaving office.	January 1, 2010, through the date of	
Assuming Office	e: Date/	 The period covered is _ of leaving office. 	, through the date	
Candidate: Elec	ction Year Office sought,	, if different than Part 1:		
4. Schedule Sumr	mary)]	
Check applicable sc		► Total number of pages including th	nis cover page:	
Schedule A-1 - //	Investments - schedule attached (X2)	Schedule C - Income, Loans, &	Business Positions – schedule attached	
Schedule A-2 - //	Investments - schedule attached	Schedule D - Income - Gifts - s	chedule attached	
Schedule B - Re	eal Property - schedule attached	Schedule E - Income - Gifts - 7	ravel Payments – schedule attached	
	-or-	interacts on any schedule		
None - No reportable interests on any schedule				
herein and in any atta	ached schedules is true and complete. I acknowle	edae this is		
-	ty of perjury under the laws of the State of Ca	-		
, 	./ 1			
Date Signed	1, 12011	Signatur		
	(month, day, year)			

SCHEDULE A-1 Investments

Stocks, Bonds, and Other Interests (Ownership Interest is Less Than 10%)

Do not attach brokerage or financial statements.

CALIFORNIA FORM 700 FAIR POLITICAL PRACTICES COMMISSION		
Name BERT	HACK	

NAME OF BUSINESS ENTITY	► NAME OF BUSINESS ENTITY
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GENERAL DESCRIPTION OF BUSINESS ACTIVITY	GENERAL DESCRIPTION OF BUSINESS ACTIVITY
f(x)	Mehler C
FAIR MARKET VALUE	FAIR MARKET VALUE
\$2,000 - \$10,000 \$10,001 - \$100,000	\$2,000 - \$10,000 \$10,001 - \$100,000
✓ \$100,001 - \$1,000,000	\$100,001 - \$1,000,000 Over \$1,000,000
7	
NATURE OF INVESTMENT	NATURE OF INVESTMENT
Stock Other	Stock Other(Describe)
Partnership O Income Received of \$0 - \$499	Partnership O Income Received of \$0 - \$499
O Income Received of \$500 or More (Report on Schedule C)	O Income Received of \$500 or More (Report on Schedule C)
IF APPLICABLE, LIST DATE:	IF APPLICABLE, LIST DATE:
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ACQUIRED DISPOSED	
► NAME OF BUSINESS ENTITY	NAME OF BUSINESS ENTITY
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1661/2 CO.	
FAIR MARKET VALUE	FAIR MARKET VALUE
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\$100,001 - \$1,000,000 U Over \$1,000,000	\$100,001 - \$1,000,000
NATURE OF INVESTMENT	NATURE OF INVESTMENT
Stock Other(Describe)	Stock Other (Describe)
Partnership O Income Received of \$0 - \$499	☐ Partnership ◯ Income Received of \$0 - \$499
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IF APPLICABLE, LIST DATE:	IF APPLICABLE, LIST DATE:
ACQUIRED DISPOSED	ACQUIRED DISPOSED
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NATURE OF INVESTMENT	NATURE OF INVESTMENT
Stock Other	Stock Other
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IF APPLICABLE, LIST DATE:	IF APPLICABLE, LIST DATE:
//_10/_10	/ / 10 / / 10
ACQUIRED DISPOSED	ACQUIRED DISPOSED
'	ı
Comments:	

SCHEDULE A-1 Investments

Stocks, Bonds, and Other Interests (Ownership Interest is Less Than 10%)

Do not attach brokerage or financial statements.

CALIFORNIA FORM FAIR POLITICAL PRACTICES COMMISSION Name

NAME OF BUSINESS ENTITY	► NAME OF BUSINESS ENTITY	
GENERAL DESCRIPTION OF BUSINESS ACTIVITY	GENERAL DESCRIPTION OF BUSINESS ACTIVITY	
FAIR MARKET VALUE \$2,000 - \$10,000 \$10,001 - \$100,000 \$100,001 - \$1,000,000 Over \$1,000,000	FAIR MARKET VALUE \$2,000 - \$10,000 \$10,001 - \$100,000 \$100,001 - \$1,000,000 Over \$1,000,000 NATURE OF INVESTMENT	
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IF APPLICABLE, LIST DATE:	IF APPLICABLE, LIST DATE:	
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NAME OF BUSINESS ENTITY	► NAME OF BUSINESS ENTITY	
GENERAL DESCRIPTION OF BUSINESS ACTIVITY	GENERAL DESCRIPTION OF BUSINESS ACTIVITY	
FAIR MARKET VALUE \$2,000 - \$10,000 \$10,001 - \$100,000 \$100,001 - \$1,000,000 Over \$1,000,000 NATURE OF INVESTMENT Stock Other (Describe)	FAIR MARKET VALUE \$2,000 - \$10,000 \$10,001 - \$100,000 \$100,001 - \$1,000,000 \$0ver \$1,000,000 NATURE OF INVESTMENT Stock Other (Describe)	
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IF APPLICABLE, LIST DATE:	IF APPLICABLE, LIST DATE:	
NAME OF BUSINESS ENTITY	► NAME OF BUSINESS ENTITY	
GENERAL DESCRIPTION OF BUSINESS ACTIVITY	GENERAL DESCRIPTION OF BUSINESS ACTIVITY	
FAIR MARKET VALUE \$2,000 - \$10,000	FAIR MARKET VALUE \$2,000 - \$10,000 \$10,001 - \$100,000 \$100,001 - \$1,000,000 Over \$1,000,000	
NATURE OF INVESTMENT Stock Other	NATURE OF INVESTMENT ☐ Stock ☐ Other	
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IF APPLICABLE, LIST DATE:	IF APPLICABLE, LIST DATE:	
/	/	
Comments:		

SCHEDULE E Income – Gifts Travel Payments, Advances, and Reimbursements

CALIFORNIA FORM 700 FAIR POLITICAL PRACTICES COMMISSION		
Name		
Bert Hack		

- Reminder you must mark the gift or income box.
- · You are not required to report income from government agencies.
- You may mark the box 501(c)(3) for a travel payment received from a nonprofit 501(c)(3) organization. When the payment is a gift it is reportable but is not subject to the \$420 gift limit.

NAME OF SOURCE	► NAME OF SOURCE
Southern California Association of Governments	Figure of Booker
ADDRESS (Business Address Acceptable)	ADDRESS (Business Address Acceptable)
818 West 7th Street, 12th Floor	, , , , , , , , , , , , , , , , , , , ,
CITY AND STATE	CITY AND STATE
Los Angeles, CA	
BUSINESS ACTIVITY, IF ANY, OF SOURCE 501 (c)(3)	BUSINESS ACTIVITY, IF ANY, OF SOURCE 501 (c)(3)
Association of Government Officials	(4,6)
- Tools and the control of the contr	
DATE(S): 01 / 01 / 10 - 12 / 31 / 10 AMT: \$ 1,200.00	DATE(S):// AMT: \$
TYPE OF PAYMENT: (must check one) 🗌 Gift 🔀 Income	TYPE OF PAYMENT: (must check one) Gift Income
DESCRIPTION: Travel reimbursement for Policy Committee Meetings (9)	DESCRIPTION:
NAME OF SOURCE	► NAME OF SOURCE
ADDRESS (Business Address Acceptable)	ADDRESS (Business Address Acceptable)
CITY AND STATE	CITY AND STATE
BUSINESS ACTIVITY, IF ANY, OF SOURCE 501 (c)(3)	BUSINESS ACTIVITY, IF ANY, OF SOURCE 501 (c)(3)
DATE(S):	DATE(S)://
TYPE OF PAYMENT: (must check one)	TYPE OF PAYMENT: (must check one)
DESCRIPTION:	DESCRIPTION:
Comments:	48114-14-14